

Technical Report

Capacity Building Course on Human Rights and Health Equity Mainstreaming in Public Health

Date: 25-29 May 2015

Venue: WHO Office- Islamabad

Background

The health sector response to persistent health inequalities; violations of health related human rights like access to health services in a sensitive manner demands for awareness, understanding and capacity building on part of health service providers, practitioners and policy makers so that all these socio-cultural issues, inequalities could be addressed. Health sector readiness and sensitive attitudes can prevent the difficulties of vulnerable and excluded groups in need of health services. Health sector capacity building together with staff and other social sectors is one of the key milestones and output of Gender, Human Rights and SDH work plan. The Cluster-3 (Promoting Health through the life course) of WHO-Pakistan in collaboration with HSD Unit-EMRO and Ministry of National Health Services, Regulation and Coordination planned these 5-days Capacity Building Course on Health Equity and Human Rights and Mainstreaming talking in account lessons learned from Gender and SDH in Pakistan. **EMRO mission based on 3 experts and WHO Pakistan facilitated the course. WHO/EMRO's training manual on "Human Rights and Health Equity: Implications for advocacy, action and governance" was adapted for the context of Pakistan.** The course illustrates that the human rights based approach is central to strengthening health governance, thus improving equitable access to quality health services, with emphasis on the marginalized and the vulnerable, while strengthening health systems and actively contributing to the progressive realization of universal health coverage.

Objectives:

1. Raising health and human rights as a value in approaching public health and improving equity in health sector response;
2. Equipping participants with skills to apply a human rights-based approach in different settings and respective fields of work;
3. Enabling participants to integrate human rights principles, values and elements in respective public health policies, planning and programmes.

Expected Outcomes:

The participants would be able to;

- Analyze health issues through a human rights lens
- conduct a risk-vulnerability and equity analysis to detect gaps in the realization of the right to health
- Identify entry points for change and informing policies and actions
- Setting targets, indicators and monitoring progress in progressive realization of the right to health and health equity
- Engage different sectors and different players while effectively managing tension and conflict
- Promote good governance through accountability and managing conflict of interest

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Course Contents:

- Human rights-based approach to health and linkages to health equity discourse
- Assessment of realization of the right to health and health inequities
- Operationalizing health policies and multisectoral actions for public health
- Public health systems and enhancing accountability

Participants Profile:

The participants for this multidisciplinary included health policy-makers/officials from federal health Ministry, civil society actors, health advocates, rights defenders, health planners, academics including professors from medical colleges and health services academy, experts from the provinces of Punjab, Sindh, Balochistan, KP and WHO staff in Pakistan.

Facilitators Profile:

1. **Dr. Hala Abou-Taleb**
Health Equity and Human Rights, GER, Policy and Health Planning
WHO/EMRO
2. **Dr. Anjana Bhushan,**
Regional Adviser, Health and Development, GER and SDH focal point
WHO/WPRO
3. **Dr. Zainab Khadr,**
Social Research Centre, American University, Cairo
4. **Masooma Butt,** NPO Gender, Human Rights and SDH- WHO Pakistan

Summary of the Proceedings:

The WHO Representative and Acting Director General Health/Director Programmes, Ministry of Health Services, Regulation and Coordination chaired the opening session. The course was delivered in participatory manner through different brainstorming and reflection exercises as well as the group work activities to impart practical tools among participants for further application of the knowledge given during the course. The key focus of the technical knowledge and presentations during course was on conceptual clarity of health as a human right, application of human rights based approach and health equity principles at policy, programme and service delivery level, tools for SDH mainstreaming and multisectoral action to adapt health in all policies approach, assessment tools and guidelines applying HRBA lens, guidelines to enhance accountability and health systems to achieve Universal health coverage. The course was very well received and evaluated (post- evaluation). The course ended with the development of four individual regional plans. The last day was dedicated for orienting WHO staff on health equity and human rights and modes of their integration in their work.

Recommendations/Follow-up points:

1. Integration of human rights and health equity in under and post graduate medical curricula.

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2. Technical support to civil society and academia to establish a network in support of health and human rights and health equity.
3. Technical support to develop pool of national experts and potential course facilitators and roll-out in other regions and provinces of Pakistan
4. Integrate the human rights-based approach, right to health principles and elements, and health equity analysis, and addressing social determinants in the ongoing process of central and provincial national and health policy development, establishment of accountability mechanisms and supportive legislations